U.S. Department of Labor OLES Office of Labor-Management Rec'd Standards
Washington, DC 20210 ANG 17 205

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

	1 / 1 / 2004 Through: 12 / 31 / 2004			
Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Kevin Mawae	Name Nat'l Football League Players Assoc			
	Labor Organization File Number 065-533			
P.O. Box, Bldg., Room No., if any 6th Floor	P.O. Box, Building and Room Number, if any 6th Floor			
Street 2021 L Street, N.W.	Street 2021 L Street, N.W.			
City Washington	City Washington			
State District of Columbia ZIP Code + 4 20036	State District of Columbia ZIP Code + 4 20036			
5. Position in labor organization. Vice President				
Enter appropriate data below If, during the past fiscal year, you or your spou (except as specified in the exclus	se or minor child directly or indirectly had any of the following interests ions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or d monetary value from an employer whose employees your organizatio	orived income or other acceptain haveful.			
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
	7.b. Amount.			
Street				
City				
State ZIP Code + 4				
Signature				
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)				
Signed & March	On 8/8/05 (202) 463-2200			
Form LM 20 (2002)	Date Telephone Number			

Name of Person Filing Kevin Mawae	File Number U -				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any). Name Reebok International Ltd Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1895 J.W. Foster Boulevard City Canton State Massachusetts ZIP Code + 4 02021	9. Business deals with: a. Labor Organization b. Trust c. Employer				
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	11.a. Nature of such dealing. Licensing Arrangement* *The dollar value of this dealing is in excess of \$1,000,000. It is difficult for me to ascertain this amount due to time and confidentiality restraints. 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Cash, Sneakers, and Other Apparel for Activities Unrelated to the Union				
	12.b. Amount. \$20,035				
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment.				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.				

Name of Person Filing Kevin Mawae File Number U-			
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	Name of Person Filing Kevin Mawae	File Number U-	

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Electronic Arts Inc	a. Labor Organization		
Trade Name, if any:	(23)		
P.O. Box, Bldg., Room No., if any	b. Trust		
Street 209 Redwood Shores Parkway	c. Employer		
City Redwood City			
State California ZIP Code + 4 94065			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name Support Control of the Control	Licensing Arrangement*	TO THE STATE OF TH	
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any	+mb dallan and a file dalling		
	*The dollar value of this dealing is in excess of \$1,000,000. It is difficult for me to ascertain this amount due to time and confidentiality		
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State State Secretaries and the second secretaries and the second	11.b. Approximate dollar value of such dealing.	Materials of the Control of the Cont	
	12.a. Nature of interest held or income received.		
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		1) 901-7071 AAAAA	
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	12.b. Amount.	\$275	